Total paid: \$ (office use only)	
Receipt number: (office use only)	



Agent: (office use only)	
Record number: (office use only)	

BANQUET LICENSE APPLICATION

A. INSTRUCTIONS

NOTE: If all of the following **four** criteria are met, then no license is needed (unless required by locality or facility): **(1)** the event is **private** (i.e., not open to the public and not in a public place); **(2)** money is **not** exchanged for alcohol or otherwise; **(3)** the event is **not** held on a club or unlicensed restaurant premises; and **(4)** alcohol purchased for the event is **not** from a wholesaler/distributor. In all other cases, a license is needed and is bound by the information presented below. Contact your local ABC office with any questions (see pq. 2).

- 1. Read the **Guidelines and Responsibilities** of Applicant (this page).
- 2. Select the appropriate **License Type** on page 3-4. License type will designate which sections you must complete and applicable fees.
- 3. Complete the appropriate sections for the license type selected.
- 4. Required fields contain asterisks.
- Locate the city/county where the event will be held (pg. 2) and determine the responsible ABC Regional Office. Mail or deliver the items in the checklist below to that office:
 - ☐ Completed and signed application (pgs. 3–10).
 - ☐ Appropriate license fees (see "License Fees" column, pg. 3-4), payable to "VA ABC" (see guideline 8 for payment restrictions).
 - ☐ Required documents (from individual sections of application)

- 6. Upon receipt of the application, an ABC special agent or administrative technician will be assigned and will contact you as needed during his/her investigation.
- 7. A nonrefundable application processing fee is included in the "single-day rate" for each type of license. If the license is refused, application withdrawn or event cancelled, only the state license fee is refunded (see "License Fees" column, pg. 3-4).
- 8. A \$5 processing fee applies to applications not submitted online.
- 9. Approved licenses, with time permitting, will be mailed to the address provided by the applicant. If requested, arrangements can be made to pick up the license at your local ABC Office.
- 10. Keep pages 1 and 2 for your reference.

GUIDELINES

- Please submit your application and all attachments (in English) at least 10 business days prior to the event date to ensure adequate processing time. If not received in sufficient time to complete an investigation, the application may be considered withdrawn.
- 2. Applicant must (a) be at least 21 years of age and (b) be able to read, write, speak and understand English.
- 3. In accordance with §4.1-222(1) (o), a police officer with police authority in the political subdivision within which the event will take place may not be granted a license.
- 4. The person completing the application for a Special Event license as defined above must be associated with the nonprofit applicant identified in section 4.
- A social security number is only required when a refund is requested. Refer to privacy statement above regarding personal/ tax information.
- 6. The name of the applicant in section 1 **must** be the same as the person signing the application in section 7.
- All applications are required to have an event date and physical address (to include street number and name, city and zip code) in section 2 before they will be accepted.
- 8. Any checks or money orders submitted for payment must be in the name of the applicant identified in section 1 or the group identified in sections 3 or 4. Cash is only accepted in person.
- 9. Any refunds will be made to the applicant and home address identified in section 1, unless ABC is notified otherwise.
- 10. Application for a banquet license does not guarantee approval.
- 11. Investigation of the application may not begin until **all** required documents have been received. **Not providing required documents** is the primary cause of delay in the licensing process.
- 12. Approved banquet licenses are for on-premises consumption only with the exception of those specifically allowing the off-premises sale of wine.
- 13. Falsification and/or misrepresentation of information may result in refusal of license and/or criminal charges.

RESPONSIBILITIES OF APPLICANT

All applicants who are granted a banquet license by the Virginia Alcoholic Beverage Control Board must adhere to the following:

- No alcoholic beverages may be sold, given to or consumed by any person in attendance at your banquet whom you know or have reason to believe is intoxicated*.
- No person whom you know or have reason to believe is intoxicated* may loiter upon the licensed area.
- 3. No alcoholic beverage may be sold, given to, or consumed by any person in attendance at the banquet whom you know or have reason to believe is less than 21.
- 4. The banquet licensee must be present during the event.
- 5. The banquet licensee may not be intoxicated* or under the influence of a self-administered drug during the event.
- 6. For a restricted banquet license, no alcoholic beverage may be sold or given away on the licensed area beyond approved hours.
- 7. No one less than 18 years of age may sell, serve or dispense beer.
- 8. Distilled spirits under a Mixed Beverage Special Event license must be purchased from a Virginia ABC store.
- 9. If wine and/or beer are purchased from a wholesaler, they must be purchased on the day of the banquet. (For Saturday or Sunday events, purchases may be made on the preceding Friday.)
- 10. Alcoholic beverages must be confined to the building, room or general area for which the license is issued and may not be sold, given away or consumed in any location outside of the licensed area. (Note: Violation may result in arrest for drinking in public.)
- 11. All alcoholic beverages are strictly for on-premises sale and/or consumption at the address of the event with the exception of events specifically allowing the off-premises sale of wine for fundraising purposes.

*A person may be deemed intoxicated when it is apparent from observation that he/she has drunk enough alcoholic beverages to affect his/her manner, disposition, speech, muscular movements, general appearance or behavior.



BANQUET LICENSE APPLICATION

B. ABC REGIONAL OFFICES

ROANOKE (REGION 1)

2943 Peters Creek Rd. NW Suite D Roanoke, VA 24019-3518 Phone: (540) 562-3604 Fax: (540) 562-3612

Alleghany County
Botetourt County
Covington City
Craig County
Franklin County
Henry County
Martinsville City
Montgomery County
Patrick County
Roanoke City
Roanoke County
Salem City

ABINGDON (REGION 1 SATELLITE)

102 Abingdon Pl. Abingdon, VA 24211-5197 Phone: (276) 676-5502 Fax: (276) 676-5549

Bland County Bristol City Buchanan County Carroll County **Dickenson County** Flovd County Galax City **Giles County Grayson County** Lee County Norton City Pulaski County Radford City **Russell County** Scott County Smyth County **Tazewell County** Washington County Wise County Wythe County

LYNCHBURG (REGION 2)

20353 Timberlake Rd. Suite A Lynchburg, VA 24502-7203 Phone: (434) 582-5136 Fax: (434) 582-5140

Amherst County Appomattox County **Bedford County Brunswick County Buckingham County Campbell County** Charlotte County **Cumberland County** Danville City **Emporia City** Greensville County Halifax County Lunenburg County Lynchburg City Mecklenburg County **Nelson County** Pittsylvania County **Prince Edward County**

STAUNTON (REGION 3)

38 Professional Way (Mail received: PO Box 1) Verona, VA 24482-0001 Phone: (540) 332-7800 Fax: (540) 248-1081

Augusta County **Bath County Buena Vista City** Clarke County Frederick County Harrisonburg City **Highland County** Lexington City Page County Rockbridge County **Rockingham County** Shenandoah County Staunton City Warren County Waynesboro City Winchester City

ALEXANDRIA (REGION 4)

6308 Grovedale Dr. Alexandria, VA 22310-2551 Phone: (703) 313-4432 Fax: (703) 313-4444

Alexandria City
Arlington County
Fairfax City
Fairfax County
Falls Church City
Loudoun County
Manassas City
Manassas Park City
Prince William County

FREDERICKSBURG (REGION 5)

7450 Freight Way Mechanicsville, VA 23116-3148

Phone: (540) 322-5440 Fax: (540) 891-3153

Caroline County
Essex County
Fredericksburg City
Goochland County
Hanover County
King and Queen County
King George County
King William County
Lancaster County
Northumberland County
Richmond County
Spotsylvania County
Stafford County
Westmoreland County

RICHMOND (REGION 6)

7450 Freight Way Mechanicsville, VA 23116-3148

Phone: (804) 213-4620 Fax: (804) 323-1055

Amelia County
Charles City County
Chesterfield County
Colonial Heights City
Dinwiddie County
Henrico County
Hopewell City
New Kent County
Nottoway County
Petersburg City
Powhatan County
Prince George County

HAMPTON (REGION 7)

Richmond City

4907 W. Mercury Blvd. Hampton, VA 23605-1601 Phone: (757) 825-7830 Fax: (757) 825-7884

Franklin City
Gloucester County
Hampton City
Isle of Wight County
James City County
Mathews County
Middlesex County
Newport News City
Poquoson City
Southampton County
Suffolk City
Surry County
Sussex County
Williamsburg City
York County

CHESAPEAKE (REGION 8)

1103 S. Military Hwy. Chesapeake, VA 23320-2343 Phone: (757) 424-6700 Fax: (757) 424-6744

Accomack County Chesapeake City Norfolk City Northampton County Portsmouth City Virginia Beach City

CHARLOTTESVILLE (REGION 9)

630 Peter Jefferson Pkwy, Suite 260 Charlottesville, VA 22911-4624 Phone: (434) 977-2974 Fax: (434) 977-4772

Albemarle County Charlottesville City Culpeper County Fauquier County Fluvanna County Greene County Louisa County Madison County Orange County Rappahannock County

COMPLIANCE/ INDUSTRY

7450 Freight Way Mechanicsville, VA 23116-3148

Phone: (804) 213-4632

Manufacturer's Event Licenses

Tastings



BANQUET LICENSE APPLICATION

C. LICENSE TYPES

	Application Sections	Event Examples	Alcohol Authorized	License Fees
1	BANQUET: For an individual (representing themselves or a group/company) who is holding a private event that is not for monetary gain.			
	Complete sections E-K and O of the application.	Birthdays, anniversaries, company parties, holiday parties, weddings, reunions or other similar events.	Complimentary beer, wine or mixed beverages. Guests may bring their own alcohol. Beer and/or wine sales (not for profit).	\$15 nonrefundable application fee + \$40 state license fee \$55 single-day rate + \$40 for each additional day*
2	and detail for an athletic physical descriptional political or religious purpose. From NOT for paragraph management of			
	Complete sections E–J, L and O of the application.	Nonprofit events such as festivals, concerts, auctions or other similar fundraising events (including political fundraisers).	Beer and/or wine sales or guests may bring their own alcohol. (Does NOT authorize the sale of mixed beverages.)	\$45 nonrefundable application fee + \$40 state license fee \$85 single-day rate + \$40 for each additional day*
3	MIXED BEVERAGE SPECIAL EVENT: For duly organized nonprofit corporations or associations that are holding a public or private event being conducted for an athletic, charitable, civic, educational, political or religious purpose. Event not for personal monetary gain.			
	Complete sections E–J, L and O of the application.	Nonprofit events such as festivals, concerts, auctions or other similar fundraising events (including political fundraisers).	Mixed beverage sales, or guests may bring their own alcohol. (Does NOT authorize the sale of wine or beer.)	\$45 nonrefundable application fee + \$45 state license fee \$90 single-day rate + \$45 for each additional day*
4	BANQUET MIXED BEVERAGE SPECIAL EVENT: For duly organized nonprofit corporations or associations that are holding a public or private event being conducted for an athletic, charitable, civic, educational, political or religious purpose. Event NOT for personal monetary gain.			
	Complete sections E–J, L and O of the application.	Nonprofit events such as festivals, concerts, auctions or other similar fundraising events (including political fundraisers).	Beer, wine and mixed beverage sales, or guests may bring their own alcohol.	\$90 nonrefundable application fee + \$85 state license fee \$175 single-day rate + \$85 for each additional day*

^{*}For multi-day events, additional nonrefundable fees may be required in some instances. Call your local ABC office for help calculating cost.



BANQUET LICENSE APPLICATION

C. LICENSE TYPES, continued

	Application Sections	Event Examples	Alcohol Authorized	License Fees
5	MIXED BEVERAGE CLUB EVENT: For a private club which already holds a beer, or wine and beer club license. May be granted up to 12 times per calendar year.			o license. May be granted up to 12
	Complete sections E-J, L and O of the application.	VFW, Elks, American Legion, or similar type clubs already holding a beer, or wine and beer license that wish to sell and serve mixed beverages.	On-premises sale and consumption of mixed beverages by club members or guests in approved areas on the club premises.	\$15 nonrefundable application fee + \$35 state license fee \$50 single-day rate + \$35 for each additional day*
6	, , , , , , , , , , , , , , , , , , , ,			l lendar year.
	Complete sections E-J, L, M and O of the application. For multiple manufacturers at single event, each representative must fill out sections E-G.	Craft beer or wine festivals.	Sale or complimentary samples of beer or wine for an event lasting from 1 to 3 consecutive days. Events held for more than three days require another application.	\$15 nonrefundable application fee + \$100 state license fee \$115 for up to three consecutive days
7	TASTING: For a business or an individual that is not prohibited from holding an ABC license and wishes to sell or give samples for the purpose of featuring and educating the consuming public about the alcoholic beverages being tasted. May be granted up to 12 times per year.			
	Complete sections E–J, L, N and O of the application.	Cooking classes or community education events.	Sale or complimentary samples of beer, wine and/or mixed beverages in approved localities. Restrictions apply on amounts and types of alcohol. §4.1-221.1	\$15 nonrefundable application fee + \$40 state license fee \$55 single-day rate + \$40 for each additional day*

^{*}For multi-day events, additional nonrefundable fees may be required in some instances. Call your local ABC office for help calculating cost.

D. PRIVACY STATEMENT

PRIVACY STATEMENT: Date of birth and federal and state tax identification numbers are collected for proof of identity. The Virginia Alcoholic Beverage Control Authority (ABC) considers all personal/tax information collected as confidential information and will not provide information to any entity except as authorized by the Code of Virginia §58.1-3 or 2.2-3700 through 2.2-3714. In the event a refund is requested, a social security number will be required.

Total paid: \$ (office use only)	
Receipt number: (office use only)	



Agent: (office use only)
Record number: (office use only)

BANQUET LICENSE APPLICATION

	E. EVENT LOCATION
1.	Facility or Establishment Name:
2.	*Address: (street)
	(city)(state)
	(zip + 4)
	F. APPLICANT INFORMATION
1.	*Select applicant type: Individual Organization
2.	*Preferred Channel: □ Email □ Postal Mail □ Phone □ Fax
3.	*Primary Phone:
4.	Secondary Phone:
5.	*Applicant First, Last Name:
6.	NOTE: Must provide either Social Security Number or Drivers License Number and Driver's License State. Not applicable if applying on behalf of a group or company.
	Social Security Number:
	Driver's License Number: Driver's License State:
	State ID Number: State:
7.	*Email:
8.	*Birth Date:
9.	Gender: □ Male □ Female □ Other
	G. CONTACT INFORMATION
1.	*Are you applying on behalf of a group or company? Yes No
	If yes, what is the applicant's relationship to the company, sponsoring organization or group?
2.	*Have you ever held an ABC Banquet license before? Yes No
	If yes, provide the approximate date and location of the last banquet license:
3.	*Have you been convicted of any alcohol-related offenses including DUI? ☐ Yes ☐ No
	Any other criminal offense? ☐ Yes ☐ No
	If yes to either of the above, provide the following (use additional sheets if necessary):
	(date): (location):
	(offense):

Total paid: \$ (office use only)	
Receipt number: (office use only)	



Agent: (office use only)	
Record number: (office use only)	

BANQUET LICENSE APPLICATION

H. ORGANIZATION INFORMATION NOTE: Complete this section only if applying on behalf of a group or company *Organization Name: DBA/Trade Name: 3. *Does this group hold IRS tax-exempt status? ☐ Yes ☐ No What is the non-profit tax exemption status? What is the name of the national non-profit organization? (if applicable) *Do you have a VA SCC Entity ID #? ☐ Yes ☐ No What is the VA SCC Entity ID #? I. APPLICANT/ORGANIZATION ADDRESS *Address: (street) *(state) *(city/town) *(zip + 4) J. EVENT INFORMATION *Event Type: *Will the event include auction/casino night? ☐ Yes ☐ No *Is the event location owned by you or your organization? ☐ Yes ☐ No 3. *Event Place: ☐ Community building ☐ Fire/rescue squad building ☐ Private home ☐ Club premises ☐ Other *Will the event be located indoor or outdoor? ☐ Indoor ☐ Outdoor *Who will attend? ☐ Open to the public ☐ Private, by invitation only 6. *Estimated number of attendees? Are there any flyers, invitations or other means of notifying invitees about the event? ☐ Yes ☐ No 8. How is your event being advertised? *Will donations be accepted to attend? ☐ Yes ☐ No *If yes, what is the suggested donation? 12. Provide ABC with any comments that you would like to share related to this application:

AM/PM

AM/PM (to) ____

*Date(s) of event:

14. *Time of event: (from)

Total paid: \$ (office use only)	
Receipt number: (office use only)	



Agent: (office use only)	
Record number: (office use only)	

BANQUET LICENSE APPLICATION

	K. BANQUET
1.	*Will bringing your own alcoholic beverages (BYOB) be permitted? Yes No
2.	*Will food be available? Yes No
3.	*Is your event being catered? □ Yes □ No
	If yes, provide the name of the catering company:
4.	*Will alcoholic beverages be furnished without charge? Yes No
	If yes, check type(s): ☐ Wine ☐ Beer ☐ Mixed drinks
5.	*Will alcoholic beverages be sold at a cash bar? Yes No
	If yes, check type(s): ☐ Wine ☐ Beer ☐ Mixed drinks
6.	*Will alcoholic beverages be included in the fee to attend?
	If yes, check type(s): ☐ Wine ☐ Beer ☐ Mixed drinks
7.	Is this a not-for-profit event? ☐ Yes ☐ No
	L. BANQUET SPECIAL EVENT/MIXED BEVERAGE SPECIAL EVENT/MIXED BEVERAGE CLUB EVENT
1.	Will you be selling wine for off-premise consumption as a fundraiser at this event? ☐ Yes ☐ No
2.	*Will bringing your own alcoholic beverages (BYOB) be permitted? ☐ Yes ☐ No
3.	*Will food be available? ☐ Yes ☐ No
4.	*Will food be included in the fee to attend? □ Yes □ No
5.	*Will food be sold separately at the event? ☐ Yes ☐ No
6.	*Will you be selling wine for off-premise consumption as a fundraiser at this event? \Box Yes \Box No
	If yes, select how your off-premise wine sales/auction will be conducted: Virtual In-Person In
7.	*Will alcoholic beverages be furnished without charge? ☐ Yes ☐ No
	If yes, check type(s): ☐ Wine ☐ Beer ☐ Mixed drinks
8.	*Will alcoholic beverages be sold at a cash bar? ☐ Yes ☐ No
	If yes, check type(s): ☐ Wine ☐ Beer ☐ Mixed drinks
9.	*Will alcoholic beverages be included in the fee to attend? \square Yes \square No \square N/A
	If yes, check type(s): ☐ Wine ☐ Beer ☐ Mixed drinks
10.	*Will alcoholic beverages be sold to members of the general public? $\ \square$ Yes $\ \square$ No
11.	*Will compensation or payment be made for the event? $\ \square$ Yes $\ \square$ No
12.	Will any proceeds from the event be donated to a group other than the applicant organization? □ Yes □ No
13.	Is this a not-for-profit event? ☐ Yes ☐ No
14.	*Name of organization to which profits will be donated:
15.	*Is the organization a non-profit? ☐ Yes ☐ No
16.	Name and Phone Number of contact person for organization:
	Name:Phone Number:
17.	*Will net profits be used for any of the following purposes?
	☐ Athletic ☐ Charitable ☐ Civic ☐ Educational ☐ Political ☐ Religious

Total paid: \$ (office use only)	
Receipt number: (office use only)	



Agent: (office use only)
Record number: (office use only)

	ww.abc.virginia.gov/licenses	804.213.4400 7450 Freight v	way wechanicsville vx 25110 FO box 3250 wechai	nicsville VA 23116
		BANQUET LICE	NSE APPLICATION	
L.	. BANQUET SPECIAL EVI	ENT/MIXED BEVERAGE SPE	CIAL EVENT/MIXED BEVERAGE CLUB EVE	NT, continued
LIC	ENSED PROFESSIONAL (CU	RRENT LICENSEE)		
NO	TE: This section is required only	for Mixed Beverage Club with an exi	isting ABC license.	
1.	*What is the existing ABC licen	se number?		
2.				
3.	*Contact Name:			
4.				
5.				
	*(zip + 4)			
		M. MANUFAC	CTURER'S EVENT	
1	*Doos the besting organization	n have any contracts or agreements	with production companies?	
1.		,	with production companies?	
2.	*Does the hosting organization	n have a list of all participating brew	veries, wineries, or distilleries? Yes No	
	*Does the hosting organization *Are you applying on behalf of	n have a list of all participating brew a group or company? Yes I	veries, wineries, or distilleries? Yes No	
2.	*Does the hosting organization *Are you applying on behalf of If yes, what is the applicant's i	n have a list of all participating brew a group or company? Yes relationship to the company, sponsor	veries, wineries, or distilleries? Yes No No ring organization or group?	
2.	*Does the hosting organization *Are you applying on behalf of If yes, what is the applicant's i	n have a list of all participating brew a group or company? Telationship to the company, sponsor	veries, wineries, or distilleries? Yes No No ring organization or group?	
2.	*Does the hosting organization *Are you applying on behalf of If yes, what is the applicant's r *Date(s) of event:	n have a list of all participating brew a group or company? Telationship to the company, sponsor	veries, wineries, or distilleries?	
 3. 4. 5. 	*Does the hosting organization *Are you applying on behalf of If yes, what is the applicant's r *Date(s) of event:	n have a list of all participating brew a group or company? Pelationship to the company, sponsor	veries, wineries, or distilleries?	
 3. 4. 5. 	*Does the hosting organization *Are you applying on behalf of If yes, what is the applicant's i *Date(s) of event: *Time of event: (from)	n have a list of all participating brew a group or company? Pelationship to the company, sponso AM/PM (to) RRENT LICENSEE)	veries, wineries, or distilleries?	
 3. 4. LIC 	*Does the hosting organization *Are you applying on behalf of If yes, what is the applicant's r *Date(s) of event: *Time of event: (from) EENSED PROFESSIONAL (CU *What is the existing ABC licen	n have a list of all participating brew a group or company?	veries, wineries, or distilleries?	
 3. 4. LIC 6. 	*Does the hosting organization *Are you applying on behalf of If yes, what is the applicant's r *Date(s) of event: *Time of event: (from) EENSED PROFESSIONAL (CU *What is the existing ABC licen	n have a list of all participating brew a group or company?	veries, wineries, or distilleries?	
2. 3. 4. 5. LIC 6. 7.	*Does the hosting organization *Are you applying on behalf of If yes, what is the applicant's i *Date(s) of event: *Time of event: (from) *ENSED PROFESSIONAL (CU *What is the existing ABC licen *Is this manufacturer a particip *Name of Manufacturer:	AM/PM (to) RRENT LICENSEE) ase number of the manufacturer? pant or co-applicant?	veries, wineries, or distilleries?	
2. 3. 4. 5. LIC 6. 7.	*Does the hosting organization *Are you applying on behalf of If yes, what is the applicant's in *Date(s) of event: *Time of event: (from) *ENSED PROFESSIONAL (CU *What is the existing ABC licenter *Is this manufacturer a particing *Name of Manufacturer: *Manufacturer Contact Name:	AM/PM (to) RRENT LICENSEE) as enumber of the manufacturer? coant or co-applicant?	veries, wineries, or distilleries?	
2. 3. 4. 5. LIC 6. 7. 8.	*Does the hosting organization *Are you applying on behalf of If yes, what is the applicant's in *Date(s) of event: *Time of event: (from) *ENSED PROFESSIONAL (CU *What is the existing ABC licent* *Is this manufacturer a participe *Name of Manufacturer: *Manufacturer Contact Name: *Manufacturer Contact Phone	AM/PM (to) RRENT LICENSEE) as enumber of the manufacturer? coant or co-applicant?	veries, wineries, or distilleries?	
2. 3. 4. 5. LIC 6. 7. 8. 9.	*Does the hosting organization *Are you applying on behalf of If yes, what is the applicant's r *Date(s) of event: *Time of event: (from) EENSED PROFESSIONAL (CU *What is the existing ABC licen *Is this manufacturer a particip *Name of Manufacturer: *Manufacturer Contact Name: *Manufacturer Contact Phone *Address: (street)	AM/PM (to) RRENT LICENSEE) ase number of the manufacturer? Doant or co-applicant? Number:	veries, wineries, or distilleries?	

Total paid: \$ (office use only)
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BANQUET LICENSE APPLICATION

N. TASTING LICENSE

I. *Sample Details:

Alcohol Type	Brand Name
☐ Beer ☐ Distilled Spirits ☐ Wine	
☐ Beer ☐ Distilled Spirits ☐ Wine	
☐ Beer ☐ Distilled Spirits ☐ Wine	
☐ Beer ☐ Distilled Spirits ☐ Wine	

NOTE: Limit of two types of distilled spirits or four types of wine or beer for tasting per event

Total paid: \$ (office use only)
Receipt number: (office use only)



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Record number: (office use only)	

BANQUET LICENSE APPLICATION

	O. APPLIC	ANT'S SIGNATURE	
		posting and publishing summary is true and refusal of the license(s) and/or criminal char	
Signature:		Date signed:	
Print name:		Title:	
WAIVER OF STATE LICENSE FEE	(Available to duly organized	not-for-profit corporations/association	s ONLY)
Pursuant to § 4.1-111 of the Code corporation or association ho	of Virginia, the Board may wa	ive the state license fee for a duly orgar onprofit event" means income from the eve aries, rent, utilities and depreciation shall n	nized not-for-profit ent shall not exceed expenses
 The applicant shall sign an aff is nonprofit. 	fidavit certifying the not-for-pro	fit status of the corporation or association	and that the event being held
 The applicant may serve alcol content by volume in two key 		ion, the amount to be no more than that w	which equals the total alcohol
The granting of a waiver is lim	nited to two events per fiscal yea	ar (July 1–June 30) for any qualifying corpo	ration or association.
THE APPLICANT ENTITY (as ide	entified on page 2)	NOTARIZATION OF AFFIDAVIT	
To witness in support of the foregoing, the undersigned makes oath that the statements contained therein and all attachments are true. Name* (print):		Note to Notary: You must verify the affiant's identification through	Notary Stamp (required of Virginia- appointed notaries public)
		documentation and have the affiant swear or affirm that the above	
		information is true to the best of his/her knowledge and belief.	
Title:		State of	
Date:		County/city of	
		Subscribed and sworn before me on thisd	
		(month), (ye	
		Notary public signature:	
		My notary commission expires:	
		Registration number: (required of Virginia-appointed notaries public)	
		(required or virgi	
	OFFI	CE USE ONLY	
Date received:	Referred to:	Application fe	e:
Postmarked date:			
Receipt no.:	Region:	CBC fee:	
License no : Territory no :			